**STUDENT APPLICATION**

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| *Director* | Steven G. Buzinski, Ph.D. | *Course* | PSYC/NSCI 493 |
| *Manager* | Emily Dolegowski |  |  |
| *Prerequisites* | Junior or Senior standingDeclared PSYC or NSCI majorPsyc101 & 2 additional PSYC or NSCI coursesRecommended GPA 3.4 | *Credits* | 3.0 |
| *Hrs/Wk* | 9hrs at worksite + 1hr in class weekly |

Applying to be a member of the Karen M. Gil Internship program in Psychology & Neuroscience is a 4-part process. **Part I** is to complete this application form. **Part II** is to obtain a copy of your unofficial transcript from UNC and any other university attended. **Part III** is to write your resume or curriculum vitae. **Part IV** is to secure two references (must gain permission before listing them as references).

When all four parts are completed, please **merge the files from parts I-IV into a single PDF** and label it as follows: LastName-FirstName-GilApplication. Then email the file to gilinternship@unc.edu with the subject line LastName-FirstName-GilApplication.

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| **Applicant Information** |
| Please type all information (except signatures) directly into the boxes. No hand-written applications will be accepted.  |
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| \*Applicant Name: |  | \*PID: |  |
|  |  |  |  |
| \*Email: |  | \*Phone: |  |
|  |  |  |  |
| \*Major(s):  |  | \*Year in College: |  |
|  |  |  |  |
| Gender Identity: |  | Race: |  |
|  |  |  |  |
| Military Veteran (Y/N): |  | \*PSYC/NSCI GPA: |  |
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| First Gen Student (Y/N): |  | \*Overall GPA: |  |

\*Required

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| Prerequisite Course #1: |  | Semester/Year: |  | Grade: |  |
|  |  |  |  |  |  |
| Prerequisite Course #2: |  | Semester/Year: |  | Grade: |  |
|  |  |  |  |  |  |
| Prerequisite Course #3: |  | Semester/Year: |  | Grade: |  |

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| Will you be able to provide transportation to your internship worksite: |  |
| *Note. Having transportation does not help or harm an individual’s chances of being selected. The information is only being gathered for eventual worksite placement purposes.* |

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| **Statements of Interest and Experience** |
| The UNC Department of Psychology & Neuroscience (psychology.unc.edu) maintains 6 programs: Behavioral Neuroscience, Clinical Psychology, Cognitive Psychology, Developmental Psychology, Quantitative Psychology, and Social Psychology. Each internship worksite will reflect the underlying theoretical orientation of one or more of these six programs. To facilitate the Gil Internship Program staff’s ability to properly match interns with a worksite please respond to the questions below. First, you will indicate your two preferred program areas (e.g., Social, Clinical), then you will provide two statements for each attesting to a) your interest and b) your experience. ***Responses to each prompt below (i.e., the passion statement & preparation statement for each program area) must be between 100 and 150 words.***  |

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| **Choice 1** |
| Program Area 1:  |  |
| Why are you passionate about pursuing this area of Psychology/Neuroscience?  |
| **Type your statements directly into these boxes (please delete this message before beginning).****The boxes are expandable.**  |
| What experiences have prepared you to contribute to a worksite focusing on this topic?  |
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| **Choice 2** |
| Program Area 2:  |  |
| Why are you passionate about pursuing this area of Psychology/Neuroscience?  |
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| What experiences have prepared you to contribute to a worksite focusing on this topic?  |
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| **References** |
| Applicants must have 2 references willing and able to attest to their likelihood for a successful internship experience (e.g., motivation for psychological work, aptitude for learning, professionalism). At least one reference must be a UNC faculty member. We suggest that the other reference be a current or former employer – but this is only recommended and not required. Please list your two references and their information below. Letters of recommendation from your references will be solicited directly if your application is advanced to the next stage of review.  |

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| **Reference 1** |
| Name: |  |
|  |  |
| Title: |  | Email: |  |
|  |  |  |  |
| Relationship to applicant: |  | Length of relationship: |  |
|  |
| **Reference 2** |
| Name: |  |
|  |  |
| Title: |  | Email: |  |
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| Relationship to applicant: |  | Length of relationship: |  |

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| **Applicant Signature** |
| Please thoroughly check all of the information above. If it is all correct to the best of your knowledge and ability, then sign and date below. Please add a written signature or add an e-signature.  |
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| Student Signature: |  | Date: |  |